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UTILITY	First Inventor		n Identifier	Ranta, Johr	ıF. A
PATENT APPLICATION				tus for simulatir	
TRANSMITTAL				323451593US	#
(Only for new nonprovisional applications under 37 C F R § 1 53(b))	Express Mail L	Label No.			
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content.	s A	ADDRESS 1	O: Box Pater	Commissioner for Patent on Application ton. DC 20231	ents
* Fee Transmittal Form (e.g., PTO/SB/17)	5.	Microfic	he Computer F	Program (Appendix)	
2. (Submit an original and a duplicate for fee processing) Specification [Total Pages 20 (preferred arrangement set forth below)			d/or Amino Ac all necessary)	id Sequence Submiss	sion
- Descriptive title of the Invention		а 🔲 (	Computer Rea	dable Copy	
- Cross References to Related Applications		ь. 🗀 і	Paper Copy (id	dentical to computer c	opv)
<ul> <li>Statement Regarding Fed sponsored R &amp; D</li> </ul>					, , ,
- Reference to Microfiche Appendix		° ;	Statement veri	fying identity of above	e copies
- Background of the Invention		ACCOM	PANYING A	PPLICATION PAR	TS
Brief Summary of the Invention     Brief Description of the Drawings (if filed)	7	Assignn	nent Papers (c	cover sheet & docume	ent(s))
- Detailed Description	8.	1	• , ,	tement Power	
- Claim(s)	] <sub>9</sub> ,	<del>,</del> `		ignee) Attome ocument (if applicable	•
- Abstract of the Disclosure	<b>⊣</b> Ⅰ~⊨		tion Disclosure	· · ·	of IDS
3. Prawing(s) (35 U.S.C. 113) [Total Sheets 5	] 10.		ent (IDS)/PTO-		
4. Oath or Declaration [Total Pages	11 [		nary Amendme		
a 🦸 Newly executed (original or copy)	12		Receipt Postca I be specifically	ard (MPEP 503) v itemized)	
b. Copy from a prior application (37 C F.R. § (for continuation/divisional with Box 16 completed)	~d\ ``'		Entity	Statement filed in prio	r application
DELETION OF INVENTOR(S)	ea) 13 L	Stateme (PTO/SE	ent(s) s	Status still proper and	
i. Signed statement attached delet				rity Document(s)	
inventor(s) named in the prior appl see 37 C.F.R. §§ 1.63(d)(2) and 1.		Other:	gn priority is cla	aimeu)	
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL	ENTITY	V Other.	Del	e Theet	
FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), I IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. §	1.28).		Pari		•••••
16. If a CONTINUING APPLICATION, check appropriate bo	x, and supply the	requisite infori	mation below and	d ın a preliminary amend	ment
Continuation Divisional Continuation-ii	n-part (CIP)	of prior app	olication No		
Prior application information. Examiner For CONTINUATION or DIVISIONAL APPS only: The entire disc	lacure of the pri		Group / Art Unit.		cupplied
under Box 4b, is considered a part of the disclosure of the acc	ompanying cont	tinuation or di	ivisional applica	ation and is hereby inco	orporated by
reference. The incorporation <u>can only</u> be relied upon when a p			omitted from t	he submitted application	on parts.
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Customer Number or Bar Code Label (Insert Customer No.	21253 o or Attach bar co	ode label here)	1	Correspondence address	s below
Charles G. Call			······································		
Name					
Patent Attorney					
53 Saint Stephen Street					
Destan	ate	MA	Zıp Code	02115	
Country U.S.A. Telephol		266-2925			
Name (Pnnt/Type) Charles & Cath		Registration N	lo (Attorney/Agent)	20,406	<u> </u>

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nder the Paperwork Reduction Act of 1995, no persons are required to ri	Patent and Tra	PTO/SB/17 (12/99) pproved for use through 09/30/2000. OMB 0651-0032 ademark Office: U.S. DEPARTMENT OF COMMERCE rmation unless it displays a valid OMB control number.	
FEE TRANSMITTAL	Complete if Known		
I LL IIIAIIOIIII IAL	Application Number		
for FY 2000	Filing Date		
Patent fees are subject to annual revision.	First Named Inventor	Ranta, John F.	
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.	Examiner Name		
See 37 C.F.R. §§ 1.27 and 1.28	Group / Art Unit		
TOTAL AMOUNT OF PAYMENT (\$) 478	Attorney Docket No.	B-26	

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to Deposit Account Number  Deposit Code (\$) Cod	METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
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11. BASIC FILING FEE   Large Entity Small Entity   Fee   F		115 110 215 55 Extension for reply within first month	] '				
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Name (Printi Type)   Charles (#ACan / (Attorney/Acant)   20,400   Telephone (017) 200-2925	Name (PrintiType) Charles C. Carl						

Signature

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(Attorney/Agent)

Date

October 3, 2001